STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobb	yist(s) <u>Heather Carrol</u>	1		
II. Name of lobby	vist's partnership, firm or	corporation, if any	γ:	
Alzheim	er's Association			
	(Name of partnership, tirm or	corporation)		
166 South Business Address:	River Road Suite 210 (Street)	Bedford (Town/City)	NH (State)	03110 (Zip Code)
(603) <u>606.6596</u> (Telepho		(Fax)	e-mail hcarroll@alz.org	
	nt covers: (Choose one – f se transactions which are		s for each elient, OR you may tany one elient).	file a separate report for
All reportable	transactions occurring in th	e months prior to th	c reporting date relative to the fo	ollowing client:
OD.	(Full Name of Client as	it appears on the Lob	byist Registration Form)	 ·
OR All reportable unrelated to any p		(including the lobb	yist's family), or the lobbying fi	rm listed below which are
IV. Date of Repo	rt April 26, 2017	on to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/17	
•	October 25, 2017 activity from 7/1/17 to 9/		January 31, 2018 X activity from 10/1/17 to 12/31/17	
V. There have If this box is chec Concord, NH 033	ked, complete just this form	d no reportable (and submit it to the	transactions made since the Secretary of State's Office, Stat	last report. ∟ e House, Room 204,
VI. Cheek if add	itional reports are attache	d:		
	•		e Addendum A– Fees and Expe	enses
Expense Reimbur	scment		must file Addendum B- Repor	
∟ If you, your f	irm, or your family has mad	le political contribu	tions, you must file Addendum	C Political Contributions
1 have read RSA and complete, to 1	the best of my knowledge are M. Caw G byist)	nd RSA 664 and he	reby swear or affirm that the fore $\frac{1 \cdot /8 \cdot /8}{(\text{Datc})}$	_

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Heather Carroll	A-2
II. Name of lobbyist's partnership, firm or corporation, if any:	
Alzheimer's Association	
(Name of partnership, firm or corporation)	. .
III. Name of Client	Date
 IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greated by any expenses: a) Total of all fees received in this reporting period 	relations, or public relations services
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 0.00 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$16,500
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0.00</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all ele: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$ 16, 500
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$ 0.00
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Signature of lobbyist)	1. /8 , /8 (Date)
Heather Carroll	
(Print Name of lobbyist)	